NH Alliance for Healthy Aging: Creating a Collective Approach to Address an Aging NH

Quarterly Meeting June 12, 2025



Agenda

- Welcome, Introductions, and Housekeeping
- UNH Research Projects Related to Older Adults
- Transportation Community Needs Assessment
- Break
- BAAS Food Insecurity and Malnutrition Reduction Pilot
- NHAHA Updates
- New Futures NHAHA Advocacy Update
- Wrap Up
- Adjourn and Lunch



UNH Home Technology Projects to Support Alzheimer's/Dementia Care



Sajay Arthanat Occupational Therapy



Momotaz Begum Computer Science



Dain LaRoche Exercise Science



Jing Wang Nursing



Mostafa Hussein Computer Science





Socially Assistive Robot for Care of ADRD at Home

- Six-month long pilot study
- Care partners receive a companion robot to provide personalized care for the care recipient
 - Reminders- Medication, food, physical activities...
 - Alerts- Wandering, fall detection, weather...
 - Activity Engagement-Home exercises, reading...
 - Activity Assistance-How to videos
- Involves a home visit followed by deployment and technical support
- Study incentive \$200 each month for six months





Understanding Progression of ADRD at Home

- 18-month research to examine how caregiving needs change with progression
- Home automation technology to support the needs with the progression
- Exploring ethical practices with AI-based technology for home care
- Involves data collection (online and in-person visit) from care partners every 2 months- About one hour
- · Study incentive \$100 for each data collection





Demo Video







Demo Video









Questions

Please Contact-

Sajay Arthanat

Ph: 603-862-1625

Email: Sajay.Arthanat@unh.edu





Impact Consulting



The Statewide Community Transportation

Needs Assessment





New Hampshire State Commission on Aging

Funded by ARPA through the New Hampshire Commission on Aging

Focus: Older adults, people with disabilities, and Veterans

Purpose of the

Goal: Build a long-term vision for coordinated, accessible, and sustainable transportation across New Hampshire



Community Engagment

- 2,000 + surveys(online and paper)
- 15-20 focus groups and interviews statewide

Analysis

- Transportation gaps and impacts
- Policy and investment review

Key Deliverables

Final Recommendations

- Strategies for NH's 10-Year Transportation Plan
- Intra-agency coordination and fund braiding

- √ Workplan approved
- √ Meta-analysis of 100+ studies complete
- √ Survey launched statewide
- √ Community outreach underway
- Tocus groups and interviews launching this summer
- Recommendations due in early 2026

Where Are We Now?





How We're Engaging Communities

ONLINE AND PAPER SURVEYS (TRANSLATED VERSIONS COMING) and interviews across NH

OUTREACH THROUGH SOCIAL MEDIA, POSTERS, POSTCARDS, AND PARTNERS INCLUSIVE DESIGN: INTERPRETER SUPPORT, STIPENDS, ADA ACCESS





Early Findings

Transportation is the issue behind theissue.

Key finding:

Average age of disability onset among adults with transportation barriers in NH: 54.7 years (95% CI: 42.5-66.9)

→ Nearly a decade earlier than most public systems are designed for





How YOU Can Help!

- Share the survey: https://www.surveymonkey.com/r/transport
- Follow and share the Facebook page: Keep NH Moving
- Help us host or refer:
 - Focus group locations
 - Community leaders
 - Older adults, veterans, and people with disabilities willing to share their experiences

Questions & Contact

Let's work together to ensure no one is left behind because of how—or if—they can get around.





THANK YOU!





TIME



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BAAS Food Insecurity and Malnutrition Reduction Pilot

- Food Insecurity Screening Tool
- Resource and Referral Tool





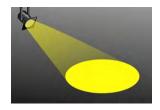
FOCUS:

Leverage & expand upon existing nutrition screening practices in New Hampshire to reduce the risk of food insecurity & malnutrition and develop a universal screening & referral process to support nutrition programs.



Backgrou epartment of Health & Human Services

Covid-19 PHE



Connection between
Increased Malnutrition Risk,
Prevalence of Food Insecurity,
and Impact of Social Isolation
on Older Adults

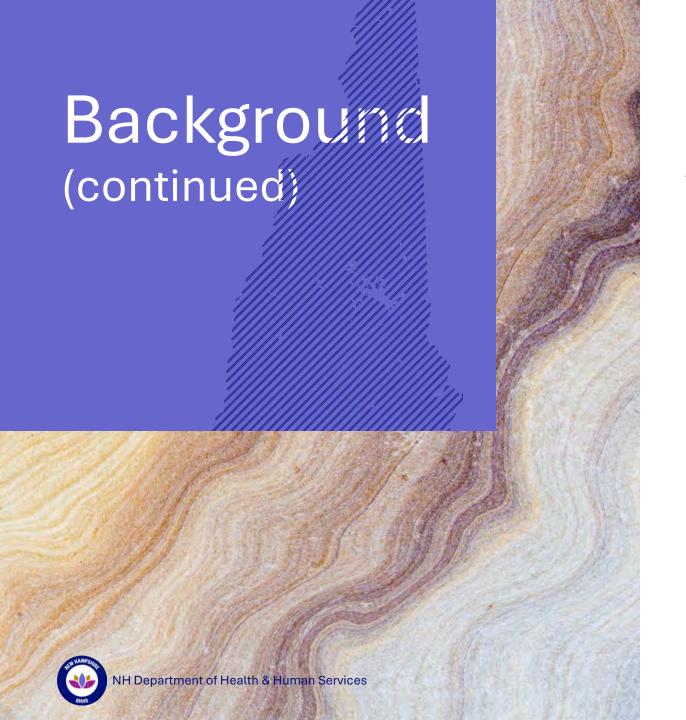
May 15, 2024 23

Backgrou (continued) partment of Health & Human Services

OAA 2020 updates

Added "Malnutrition
 Screening" to Routine
 Health Screenings

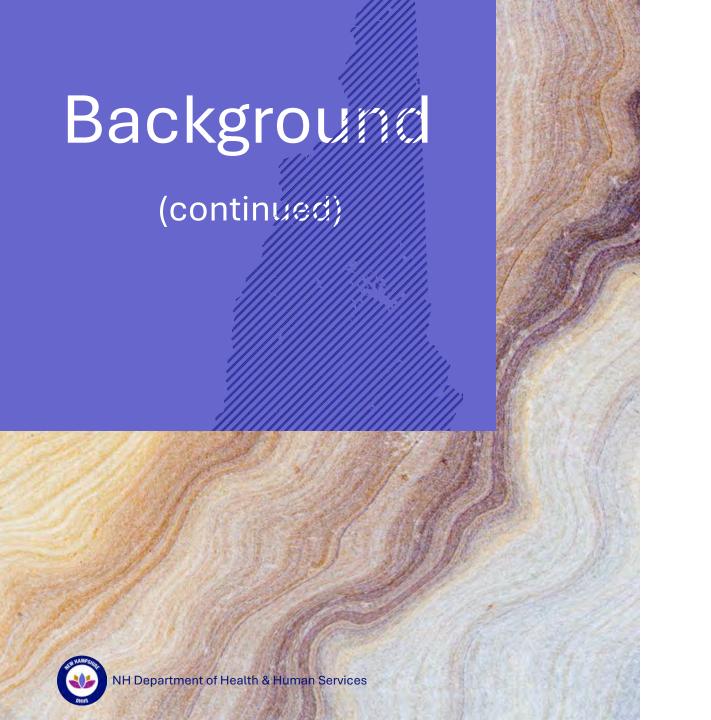
 Addition of "reduce malnutrition" as a purpose of nutrition services



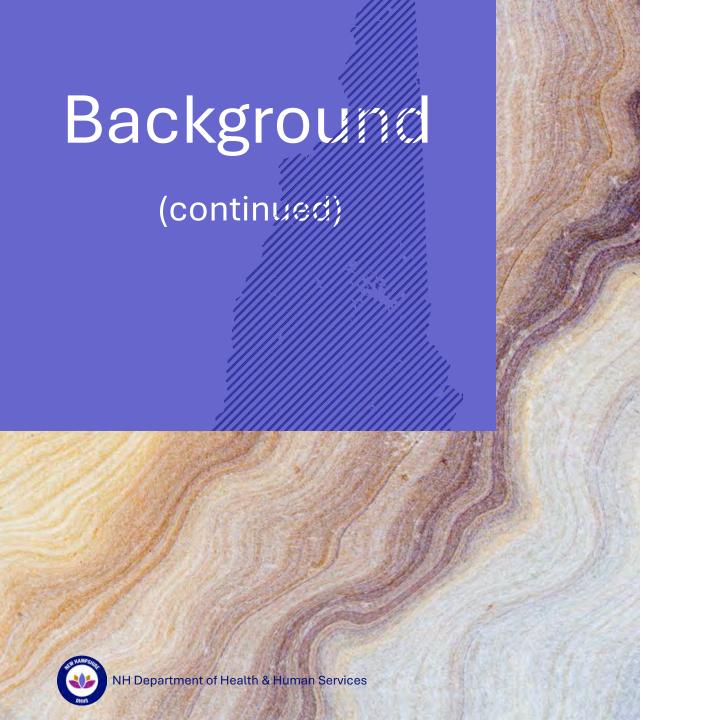
2024-2027 NH SPOA

Strategies:

Educate Meals on Wheels providers on isolation/ loneliness to have this network of providers share information on programs/services that might help to reduce isolation/loneliness.



- •Objective:
- Reduce hunger, malnutrition risk and social isolation by strengthening food and nutrition security and social supports for older adults through homedelivered and congregate meals; and supplemental foods [CSFP, SNAP].



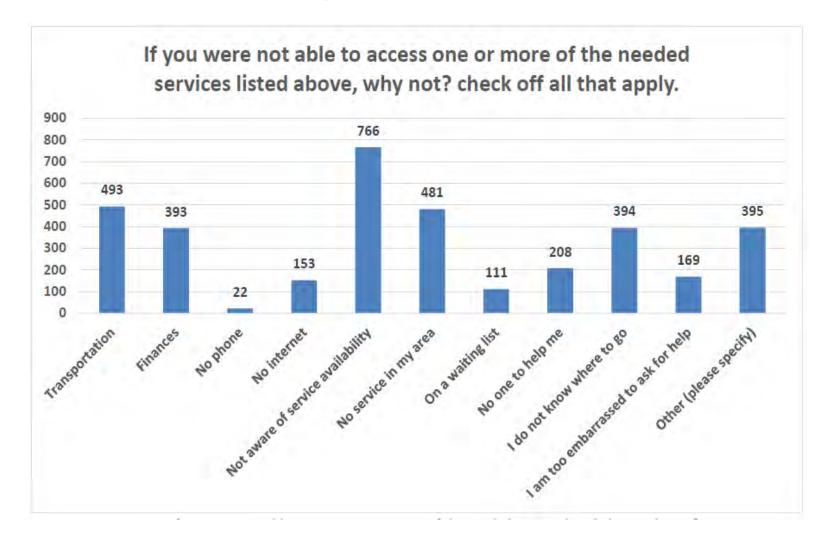
Strategies:

Leveraging APS workers to expand malnutrition risk and food insecurity screening and referrals by providing training, resources,...

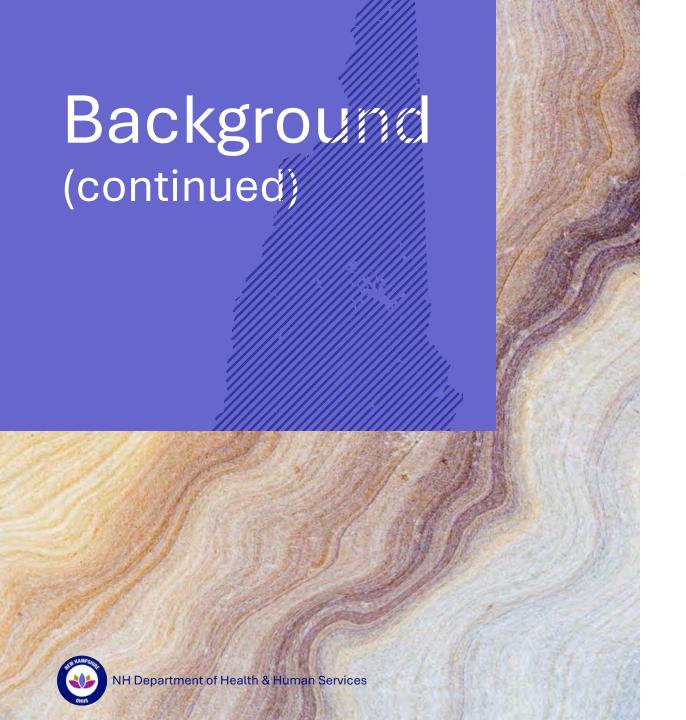
June 12, 2025

NH SPOA 2024-2027 Survey Result









NH Hospital Association

 Agreed to implement universal Food Insecurity
 Screening Tool.

June 12, 2025

Determine Your Nutritional HEALTH

The warning signs of poor nutritional health are often overlooked. Use this Checklist to find out if you are at nutritional risk.

Agency:

Client:

Date:

The Nutrition Screening Initiative 1010 Wisconsin Avenue, NW, Suite 800 Washington, DC 2007 The Nutrition Screening Initiative is funded in part by a grant from Ross Products Division of Abbott Laboratories, Inc.

Directions:

- 1. Read each statement below.
- Circle the number in the "Yes" column for those that apply to you.
- Add the circled numbers to get YOUR nutritional risk score total.

	Yes
I have an illness or condition that made me change the kind and/or amount of food I eat.	2
I eat fewer than two meals a day.	3
I eat few fruits or vegetables, or milk products.	2
I have three or more drinks of beer, liquor or wine almost every day.	2
I have tooth or mouth problems that make it hard for me to eat.	2
I don't always have enough money to buy the food I need.	4
I eat alone most of the time.	1
I take three or more different prescribed or over-the-counter drugs a day.	1
Without wanting to, I have lost or gained ten pounds in the last six months.	2
I am not always physically able to shop, cook and/or feed myself.	2
If Your Nutritional Risk Score Total is	

If Your Nutritional Risk Score Total is...

Risk

0-2	Good!	Recheck your score in 6-12 months.
3-5		See what can be done to improve your eating habits & lifestyle. Our agency can help.
6 or more	High Nutritional	Bring this Checklist the next time you see your healthcare provider

and ask for their advice.

-ACL required screening tool for all Nutrition Services providers contracted with BAAS

Congregate and Home Delivered Meals

Food Insecurity Malnutrition

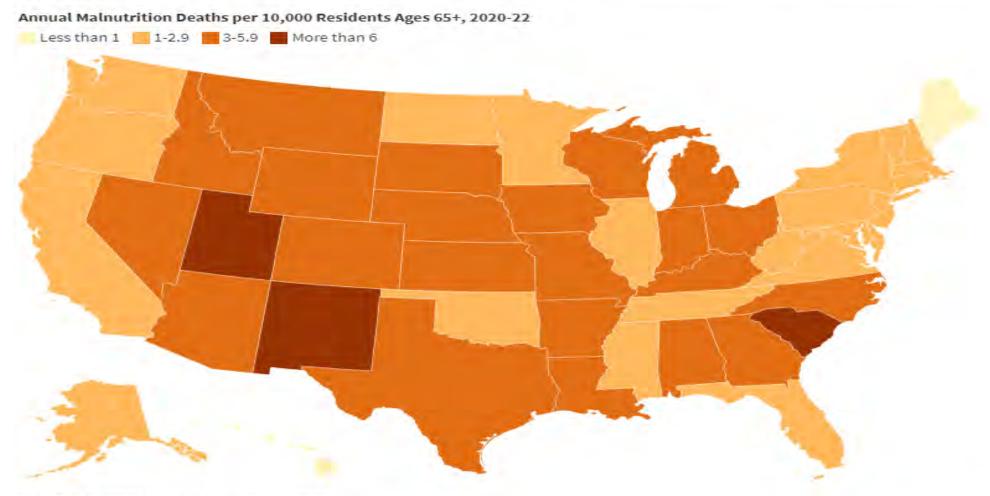


Malnutrition-Related Death

→ Food Insecurity increases the risk of Malnutrition in community-dwelling older adults

Source: Maturitas. 2019 Jan; 119:8-13. doi: 10.1026/j.marturitas.2018.10.009

Malnutrition deaths are common across America, killing at least one in 10,000 seniors annually from 2020 through 2022 in all but two states.



Note: Data for 2022 is provisional as of March 2023.

Source: U.S. Centers for Disease Control and Prevention.

Credit: Phillip Reese for KFF Health News Embed Download image

KFF Health News

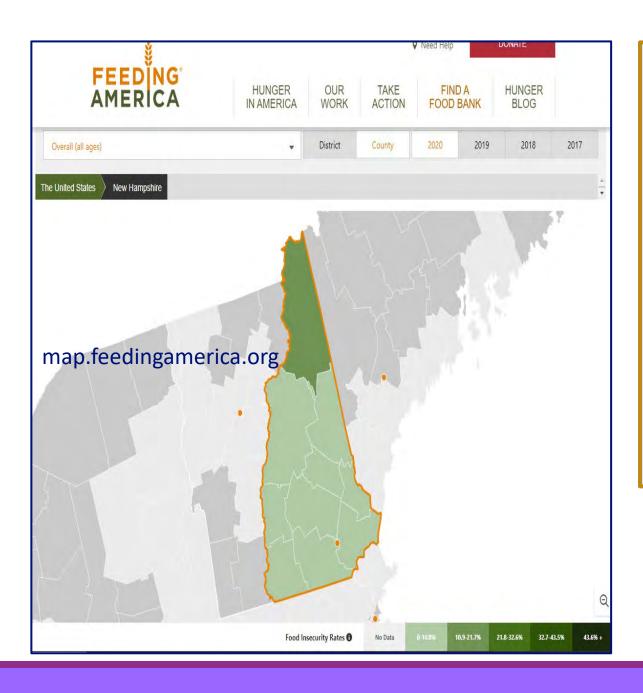
Malnutrition deaths rose in 2022 even as lockdowns faded. Experts said the persistence of the trend could be due to some of the oldest residents continuing to isolate.



CMS estimates malnutrition affects 33-45% of the population.

only 7% of the cases are diagnosed

- Study: Identify nutrition risk in a community setting - Dual Purpose
 - •identify individuals who screen + for nutrition risk, and
 - •connect them to community nutrition resources.
 - 221 individuals screened
 - -140 (63%) + for nutrition risk
 - -84 (38%) + for food insecurity
 - 14 (6%) + for malnutrition risk
 - 42 (19%) + for both



Food Insecurity in NH:

Year Overall Seniors (>60)/%

2020 No data

2021 11,279/2.9

2022 15,000/3.5

2023 21,447/5.2

Let's Talk Pilot 2 years: 2023-2025



June 12, 2025

Food Insecurity (FI) and Malnutrition Reduction Pilot-Participants - Phase 1



- 10 BAAS contracted Nutrition Services providers
- all 10 counties in NH
- Home delivered meals and congregate dining
 - FI Screening and Nutrition Risk Screening: Initial Intake and at least annually
 - Intake staff



- Adult Psychiatric facility
- 185 beds, 10 patient units
- FI screening added to strategic plan SFY 2023
 - FI Screening: All admissions
 - Clinical Nutrition Staff:
 Dietitians, Diet Technician

ADULT PROTECTIVE SERVICES

- 12 District Offices
- all 10 counties in NH
- FI screening added to APS state approved screening references
 - FI Screening: Client receptivity and/or needs assessment based
 - Field Case Workers
 - Central Intake staff will have Resource & Referral tool



Food Insecurity (FI) and Malnutrition Reduction Potential-Participants Phase 2 & Post Pilot



- Community Mental Health Coordinator
- Provides long term community support and follow up
 - Up to one year based upon conditions of discharge plan





Could it be

?

YOU?

- Long term: include Social Workers and Nursing
 - Part of pre-discharge planning

Food Insecurity Screening Tool



June 12, 2025



-Individual screens positive for FOOD INSECURITY If they answer either "Often True" or "Sometimes True" to either or both

statements.

Resource and Referral Tool



June 12, 2025

Resource and Referral Reference Key Food & Nutrition Services Service Connection Informational Resources – Food and Nutrition Farmers Markets, Farm Stands, CSA Health & Wellness Education, In-person Health & Wellness Education, Online Social & Emotional, and Recovery Support Templates Acronyms ADRC – Aging & Disability Center (formerly ServiceLink) AARP – American Association of Retired Persons CAPBM – Community Action Program, Belknap-Merrimack CSA – Community Supported Agriculture CSFP – Commodity Supplemental Food Program DHHS – Department of Health & Human Services EBT - Electronic Benefits Transfer NHFB – New Hampshire Food Bank SFMNP – Senior Farmers Market Nutrition Program SNAP – Supplemental Nutritional Assistance Program SSI – Supplemental Security Income TANF – Temporary Assistance to Needy Families TEFAP – The Emergency Food Assistance Program UNH - University of New Hampshire VNA – Visiting Nurse Association WIC - Woman, Infants & Children

Social & Emotional, and Recovery Support

Resource Information	QR	Contact Information
Caregiver Connection – Online Support Group		https://www.granitevna.org/calendar/
Support group for family caregivers to connect and support each other through similar challenges in a safe space. Recommended to call and ask for program availability.	Document (ast modified: May 27 every month. 10-11am priorie: 000-224-4093
Waypoint		https://waypointnh.org/activities/
Free online or in-person activities such as support groups, social events, and classes. Link to general activities page.		Phone: 603-518-4000
AmeriCorps Senior Companion Program – Volunteer and Recipient		https://capbm.org/Senior-Companion
Provides friendly visitation and transportation to homebound adults. Volunteers also provide respite to family caregivers in need of a break. Visits available M-F 8:30am-4:30pm. Must be 55 and meet income requirements. Call to register.		Phone: 603-225 -3286
AARP Friendly Voice - Phone Calls		https://www.aarp.org/home-family/friends- family/friendly-voice/
Trained AARP Friendly Voice volunteers standing by ready to chat, listen, or just say hello. Also available in Spanish. The caller ID will say "800 Service." Please take note of this number so that you recognize it when a volunteer calls. It is also beneficial if you have voice mail in case we miss you.		English Phone: 1-888-281-0145 Spanish Phone: 1-888-497-4108
WellnessLink		https://wellnesslinknh.org/community-
		calendar/?tribe_ecp_custom_3[0]=Online
Assists in connections to conversations, classes, activities and events in local communities. Hosts community calendar to share and		Phone: Phone: 1-866-452-1693, press 2

Social & Emotional, and Recovery Support

promote statewide events (online and in-	
person) for Granite Staters age 60 and over.	
Recovery Community Centers – support	https://www.dhhs.nh.gov/programs-services/health
services	care/recovery-support-services
Provides information on recovery support	Email: Each center has its own site
services for individuals and families in NH.	Phone: Each center has its own phone number
Including housing, family supports and peer	Address:
recovery support service and organizations.	Other:
Recovery Community Centers - Center	https://www.dhhs.nh.gov/sites/g/files/ehbemt476/f
locations	es/documents2/rco-referral-guide.pdf
Provides location of peer-led and peer-run	Email: Each center has its own site
agencies that provide services to support	Phone: Each center has its own phone number
people in their recovery from substance	Address:
misuse. All recovery centers throughout the	Other:
state of New Hampshire are low barrier and no	
cost for services; the only requirement is a	
desire to focus on your recovery.	
Interventions & Crisis Lines for Mental Health	
and Substance Misuse	
and Substance Misuse NH Rapid Response Access Point	Phone: Call or text NH Rapid Response at
	Phone: Call or text NH Rapid Response at 833-710-6477
NH Rapid Response Access Point Available 24/7 for any adult, youth, or family experiencing a mental health or substance use	
NH Rapid Response Access Point Available 24/7 for any adult, youth, or family experiencing a mental health or substance use crisis in New Hampshire. Responder can talk or	
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NH Rapid Response Access Point Available 24/7 for any adult, youth, or family experiencing a mental health or substance use crisis in New Hampshire. Responder can talk or come to see caller in person Call 988 Someone to talk to For suicide prevention and behavioral health crises that do not require emergency services response. Connects callers to the national	833-710-6477
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Resource Information		Contact Information
Grafton County Senior Citizens Council	[insert QR code here]	[Insert hyperlink here]
Loans donated medical equipment based on availability/first come first served basis.		Email: Phone: Address: Other:
Food Pantry: Horse Meadow Senior Center	[insert QR code here]	[Insert hyperlink here]
Serving Haverhill, North Haverhill, Woodsville, Pike, Monroe, Piermont, Bath, Bento. Call for hours of operation.		Email: Phone: (603) 787-2539 Address: 91 Horse Meadow Rd., North Haverhill, NH 04774 Other:
[Your Agency/program/service]	[insert QR code here]	[Insert hyperlink here]
[Insert resource description, relevant program details, agency notes, etc.]		Email: Phone: Address: Other:
[Local agency in your service area]	[insert QR code here]	[Insert hyperlink here]
[Insert resource description, relevant program details, agency notes, etc.]		Email: Phone: Address: Other:
[Insert Resource Title]	[insert QR code here]	[Insert hyperlink here]
[Insert resource description, relevant program details, agency notes, etc.]		Email: Phone: Address: Other:

Templates [add by copying and pasting into appropriate section]

[Insert Resource Title]	[insert QR code here]	[Insert hyperlink here]
[Insert resource description, relevant program details, agency notes, etc.]		Email: Phone: Address: Other:
[Insert Resource Title]	[insert QR code here]	[Insert hyperlink here]
[Insert resource description, relevant program details, agency notes, etc.]		Presentation last saved: Just now Phone: Address: Other:
[Insert Resource Title]	[insert QR code here]	[Insert hyperlink here]
[Insert resource description, relevant program details, agency notes, etc.]		Email: Phone: Address: Other:
Document last modified:	Wed at 4:08 PM	
[Insert Resource Title]	[insert QR code here]	[Insert hyperlink here]
[Insert resource description, relevant program details, agency notes, etc.]	-	Email: Phone: Address: Other:
[Insert Resource Title]	[insert QR code here]	[Insert hyperlink here]
[Insert resource description, relevant program details, agency notes, etc.]		Email: Phone: Address: Other:

Monitoring for Impact & Effectiveness: agency feedback

June 12, 2025



Nutrition Services Providers

Resource and Referral Tool

Initial conversation & Formal intake process

Staff Feedback

- •Feel better equipped to support & assist people & respond to requested/identified need(s).
- Quick reference tool resulting in responding in real time.
- •Appreciate "one-stop shop". Streamlines information access that might otherwise be overlooked (less time).



New Hampshire Hospital (NHH)





Hunger Vital Signs (HVS) was incorporated into nutrition admission assessments starting November 2024.

- More than 125 newly admitted patients have been screened for Food Insecurity.
- 33.9% screened positive for Food Insecurity



NHH: Staff Feedback and Next Steps



•Many patients responded "no" to both statements but noted they were already connected to services or receiving help



•Clinical nutrition staff felt that implementing the HVS connected them to social workers



•NHH plans to have the HVS built into the electronic medical record in the next year; data collection to continue





Thank you.

MAUREEN BROWN, RDN Nutrition Consultant, BAAS

Maureen.Brown@dhhs.nh.gov

603-731-1425





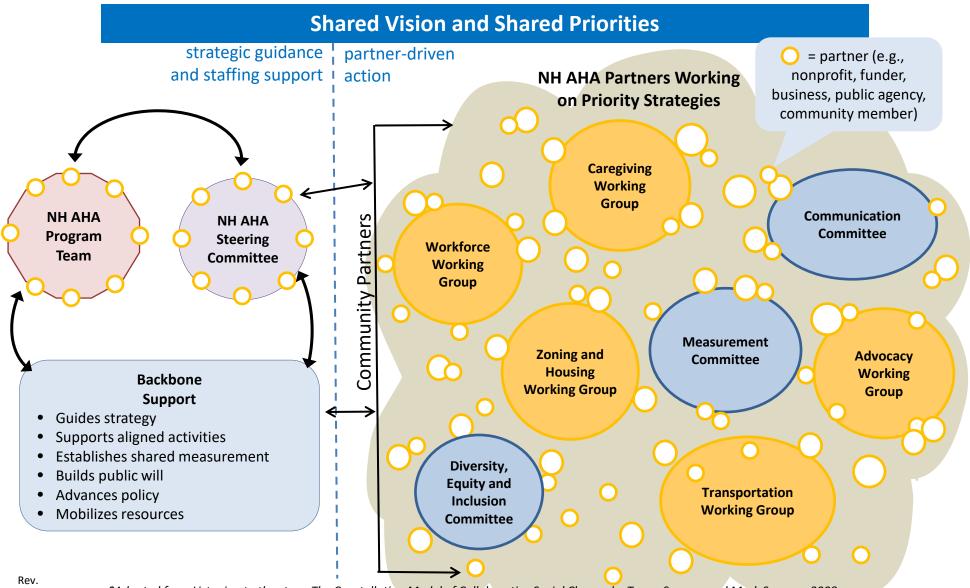
NHAHA Updates





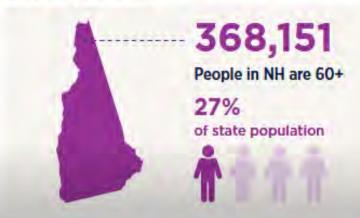


Strategic Structure



New Hampshire's older population grew 66,000 people

Since our 2019 report



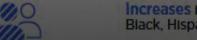
More opportunities to volunteer, serve, and stay engaged



Volunteerism

61% of older adults are age 65-74

The 65+ population is shifting younger and are active social contributors through volunteerism



Increases in population 65+ who are Black, Hispanic, Asian, and Other Race(s)

State Rates for Chronic Conditions 65+

Hypertension (68%)	
4+ Chronic Conditions (54%)	- 34
Arthritis (54%)	
Ischemic Heart Disease (34%)	
Depression (31%)	
Diabetes (25%)	

Where you live matters



	Urban	Rural
Population Characteristics		
65+ Population	18.3%	28.5%
Households Without Access to the Internet (All Ages)	7.1%	14.3%
Annual Income Above \$100,000	31.7%	22.8%
Health Conditions 65+		
Breast Cancer (Women)	10.3%	8.7%
High Cholesterol	72.9%	67.1%
Osteoporosis	16.0%	13.9%

- Download your community profile at:
- HEALTHYAGING DATAREPORTS.ORG
- Educate yourself and others about the Indicators in your community

ENGAGE

- Encourage participation in the age-friendly movement
- Bring people together to talk about the data
- Think about what your community needs to promote health for all ages



ACT

- Get involved! Join New Hampshire Alliance for Healthy Aging
- · Use data to Inform your work
- Identify and build on what s working

NH Healthy Aging Data Report



1/4 of NH older adults live alone

4 rural communities in NH report high

There is positive momentum towards supporting all New Hampshire citizens as they age.

Ago Moll NILL



Gerontology Institut



National Strategy to Support Family Caregivers

A roadmap to improved services and supports for family caregivers



Strategy Proposes 5 Main Goals:



Increase awareness and outreach



Build partnerships and engagement with family caregivers



Strengthen services and supports



Ensure financial and workplace security



Expand data, research, and evidence-based practices

Strategy Includes:

First Principles: Cross-Cutting Considerations for Family Caregiver Support

Key principles that must be reflected in all efforts to improve support to family caregivers

Federal Actions

Nearly 350 actions that 15 federal agencies will take in the near term to begin to implement the strategy

Actions for States, Communities and Others

More than 150 actions others can take

NHAHA Caregiving Workgroup Strategies



Increase caregiver friendly workplaces



Act as a convenor on caregiving issues



Increase caregiver self-identification and awareness



NHAHA Caregiving Workgroup Strategy: Coffee and Caregiving Conversations

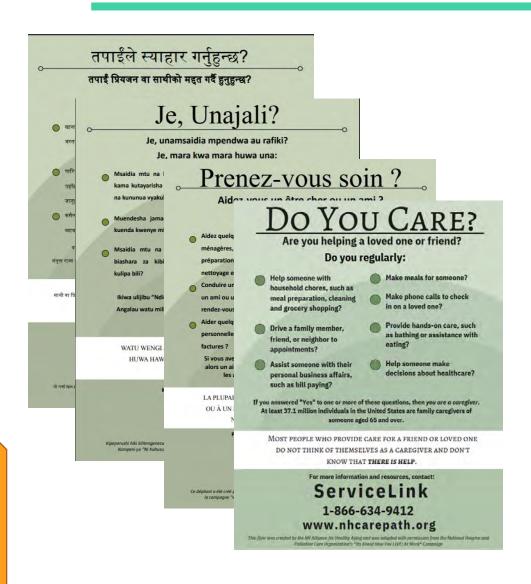
Coffee and Caregiving **Conversations** is a quarterly meeting that provides support, dialogue, and a way for organizations and individuals to connect and leverage each other's work to achieve the common goal of addressing caregiving issues across New Hampshire.



Starting in 2021, Coffee and **Caregiving Conversations** has grown to a group of more than 20 organizations and individuals. The group meets the third Friday of the month, every quarter. The next meeting will be Friday, August 22, 8:00 AM -10:00 AM.



NHAHA Caregiving Workgroup Strategy: Caregiver Self-Identification Tool



The Caregiving Workgroup created a caregiver self-identification flyer that outlines typical caregiving tasks and available resources. Translated into 7 different languages, the workgroup is partnering with organizations such as the NH Medical Society, AARP, and the Aging and Disability Resource Centers to disseminate the flyer. The flyer is currently being updated to include more resources.



NHAHA Direct Care Worker (DCW) Council



NEW HAMPSHIRE DIRECT CARE WORKER COUNCIL

Creating change through positivity, integrity, and compassion by direct care workers for direct care workers.

WAYS TO PARTICIPATE



Attend virtual monthly council meetings



Receive updates, news, and activities about the council



Send us your thoughts! It could be ideas or stories, a resource you use, or a training you found valuable.

PURPOSE

This council seeks to develop and shape the profession. It is <u>only</u> for direct care workers.

The Council:

- Informs policy
- Provides a network for direct care workers
- Promote direct care work as a meaningful, respected position
- Provide expertise to employers, legislators, and stakeholders when making decisions about direct care work



GET IN TOUCH

Kristina Peterson, Coordinator Kristina.Petersonl@unh.edu

DCW Council Priorities

- Promote awareness of the Council through distribution of flyer and recruitment of direct care workers (distribution list)
- Recruit and sustain attendance of 4 or more Council members at monthly meetings
- Host in-person direct care worker education and Council meeting
- Provide support and education to create direct care worker leadership for the Council in 2025



Advocating for Change>>>

In New Hampshire



New Futures>>>

Judtih Jones, Esquire Healthy Aging Policy Coordinator jjones@new-futures.org Martha McLeod
VP Community Engagement
mmcleod@new-futures.org

Michaela Safford
Communications Coordinator
msafford@new-futures.org



Biennial Budget >>> Phases



2025 legislation



Bills that Passed Both Bodies

>>> To the Governor

- Committee of Conference
 - Budget and Budget Amendment Reconcile the House and Senate versions of HB 1 and H 2
 - Individual Bills Reconcile House/Senate Amendments

2025 legislation



What are We Watching?

- CCRC Protections
- Increase in Personal Needs Allowance
- Medicare Advantage Notice
- Protections in Real Estate Contracts
- Study Committee LTSS Managed Care
- Processing Medicaid Applications

2025 legislation



- What are We Watching?
- >>> Commission on Aging
-))) HB 60
- Anti DEI Language
- Medicaid Work Requirement
- Medicaid Cost Sharing
- >>> Medicaid Rates
- Prescription Drug Affordability Board

Advocating for Healthy Aging

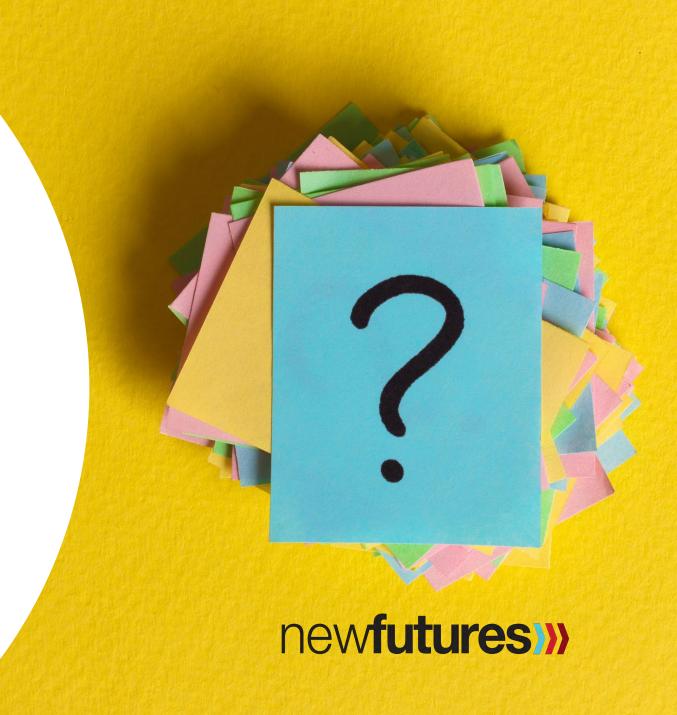
Stay Updated >>>

https://new-futures.org/current-legislation



what's next >>>





2026 Legislative Session

Healthy Aging

Getting Ready







Priority Areas



Listening Sessions



Research



Collaboration



sign up for action alerts >>>



www.new-futures.org/training/sign-up

Save the Date! 2025 Quarterly Meetings

Thursday, September 18, 2025 Thursday, December 11, 2025





Engage with NHAHA



NHAHA website www.nhaha.info



Facebook

https://www.facebook.com/NHAHA603



Twitter

https://twitter.com/NHAHA603



LinkedIn

https://www.linkedin.com/company/the-new-hampshire-alliance-for-healthy-aging



Thank you for participating!

For questions or additional information, contact:

Jennifer Rabalais jennifer.rabalais@unh.edu

